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						(Signature)	
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	DRNEY DOCKET NO.	CONFIRMATION NO.	
10/599,319 12/14/2006 Toshimitsu Furuki 20154/0205456 USO 6827 FITLE OF INVENTION: CLAMP MECHANISM OF THROWAWAY TIP 4401/1320-USO							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/26/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
FRIDIE JR, WILLMON		3724	407-107000	-			
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-0 Number is required. 3. ASSIGNEE NAME A	lication (or "Fee Address 02 or more recent) attach ND RESIDENCE DATA	inge of Correspondence "Indication form led. Use of a Customer A TO BE PRINTED ON	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type)				
PLEASE NOTE: Un recordation as set for	less an assignee is ident th in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the portion of t	patent. If an assignee is it assignment.	dentified below, the d	locument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Mitsubishi	Material Corpora	tion	Tokyo, Japan				
Please check the appropr	riate assignee category or	categories (will not be p	rinted on the patent):	Individual 🗵 Corpora	tion or other private gr	oup entity Government	
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